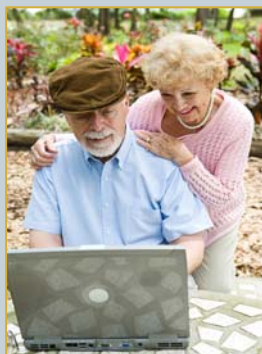


Montgomery County, Maryland

Commission on Aging

Annual Report 2009



**Montgomery County — A Community of
Choice for Mature Adults**

March 2010



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Most photographs are provided courtesy of Les Trachtman, former member of the Commission on Aging, current Chair, Senior Arts Education Committee of the Vital Living Committee.

Letter from the Chair of the Commission on Aging

March 22, 2010

The Honorable Isiah Leggett, County Executive
The Honorable Nancy Floreen, Council President

The Montgomery County Commission on Aging is pleased to present its Annual Report for 2009. This report summarizes the principal activities undertaken by the Commission in 2009 in carrying out its responsibilities to provide advice and counsel to the County Executive and the County Council on matters pertaining to the elderly. We pursue this function by advocating at the local, state and federal levels on behalf of programs that advance the health and independence of the most vulnerable and needy of our seniors as well as programs and facilities designed for use by the active and vital living segment of our senior community. The Commission strives to be a responsible voice for our aging population and to maintain a relationship of trust with all the agencies of government, private interest groups, and individual seniors.

The most significant aspect of the Commission's activities during 2009 was the increased vigor with which the members sought to address the problems and issues relating to the senior community in light of the challenges posed by the budget and economic crises. The challenges that government faces in funding social service and everyday needs for the senior population seemed to energize Commission members to seek new and creative ideas and solutions. This year, there was increased interest in our advocacy activities with legislators at the county and state levels, and a substantial increase in participation in the Commission's summer study programs, which typically deal with new and emerging issues. The summer study programs involved almost all Commission members and attracted the participation of several non-Commission members—many of whom are experts in their fields—adding substantially to the quality of the considerations.

We note with sadness the passing of Blanche Keller, a member of the Commission. Blanche was Chair of the Oversight Committee, Chair of the 2008 summer study on senior centers and a valued contributor to the work of the Commission. Blanche was widely acclaimed in Montgomery County as an outstanding community participant and her passing is a great loss to the Commission.

Finally, the Commission wants to express its profound thanks and appreciation to Dr. John (Jay) Kenney, Chief, Aging and Disability Services, and Dr. Odile Saddi, Director, Area Agency on Aging, both of the Department of Health and Human Services (DHHS). Jay Kenney provided the Commission with exceptional support, guidance and wise counsel. Odile Saddi, in addition to effectively administering the DHHS social service safety net programs for the aging population, serves as Executive Secretary to the Commission where her contributions are outstanding and invaluable. Jay Kenney and Odile Saddi are exemplars of social service professionals.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Irwin Goldbloom', written over a horizontal line.

Irwin Goldbloom, Chair

Montgomery County Commission on Aging

COMMISSION OFFICERS

Irwin Goldbloom – Chair
Patricia Lesnick – First Vice Chair
James Mayo – Second Vice Chair
Judith Jaffe – Secretary
Alan Kreger – Treasurer

COMMITTEE CHAIRS

Communications and Community Outreach – Marcia Pruzan
Health and Wellness – Elaine Kotell Binder
Public Policy – Michael Goldman
Senior Services Oversight – Irwin Goldbloom and Spencer Schron

DEPARTMENT LIAISONS

Austin Heyman, Office of Community Partnerships
Pazit Aviv and Gail Gunod Green, Housing Opportunities Commission
Joy H. Barrow and Judy Hanger, Department of Transportation
Patricia Streeter, Department of Recreation
Ciriaco Gonzales, City of Rockville Commission on Aging
Matthew Kelleher, Office of Fire Marshall
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Sam Korper, Commission on Health Liaison
Barbara Woodall, Senior Vital Living Committee

STAFF

Odile Saddi, Aging and Disability Services
Lynne Gaither, Aging and Disability Services

COMMISSION MEMBERS

Danielle Benjamin	Patricia Lesnick
Elaine Kotell Binder	Judith Levy
Morton A. Davis	James Mayo
Tammy Duell	Diane Vy Nguyen-Vu
Irwin Goldbloom	Paula Post
Michael Goldman	Marcia Pruzan
John G. Honig	Harriette Rindner
Vivien Hsueh	Spencer Schron
Judith Jaffe	Beth Shapiro
Miriam Keltz	John Sprague
Blanche Keller	Robert Tiller
John J. Kenney, Executive Liaison	Judith Welles
Alan Kreger	Grace Whipple
Zoe Lefkowitz	

Enabling Legislation

The Commission on Aging, established in 1987, operated under the auspices of the County Council until August 1974, when its operation was transferred to the Executive Branch. Chapter 27, Article III of the Montgomery County Code created the Commission on Aging under the declared public policy of the County to:

- Improve conditions of the aging or elderly in the county;
- Work toward the elimination of restrictions that impede older citizens from full participation in the mainstream of community life; and
- Assist and stimulate all levels of government and the community to be more responsive to the needs of the county's older residents.



COA Chair,
Irwin Goldbloom
at COA Annual Meeting

In addition, the Commission on Aging serves as the Advisory Council to the Area Agency on Aging as described in the federal Older Americans Act. Members of the Commission are appointed by the County Executive subject to confirmation by the County Council. Under a section specifying powers and duties of the Commission, there are several provisions outlining a broad spectrum of powers. The following two subsections provide a good example of the breadth of the Commission's power:

The Commission shall have the power...

- (a) To research, assemble, analyze and disseminate pertinent data and educational materials relating to activities and programs which will assist in meeting the needs and solving the problems of the aging; to cooperate with public and private agencies, organizations, and individuals in identifying and solving the problems of the aging; and to develop and conduct, as appropriate, in cooperation with county government and other services and programs dealing with the problems and needs of the aging.
- (g) To advise and counsel the residents of the county, the County Council, the County Executive and the various departments of county, state and federal governments on matters involving the needs of the aging, and to recommend such procedures, programs or legislation as it may deem necessary and proper to promote and ensure equal rights and opportunities for all persons, regardless of their age. ■

Commission Membership

The Commission on Aging consists of no fewer than 18 members appointed by the County Executive, subject to confirmation by the County Council. Members must be county residents of whom a majority shall be age 60 and older. Members include: those who participate in or who are eligible to participate in programs under the Older Americans Act; local elected officials or their designees, individuals who are or who have been active in government, business, industry, labor, community service, religious, social services, education, the professions; and representatives of major organizations or agencies concerned with aging. ■

Area Agency on Aging

The Area Agency on Aging (AAA), headed by Dr. Odile Saddi, is responsible for assuring the provision of a continuum of home and community-based services, and provides staff support to the Commission on Aging. The AAA is actively involved with community partners, administering county and state grant awards to contractors, public education/outreach, networking and referrals.

AAAs were established under the federal Older Americans Act (OAA) in 1973 to respond to the needs of Americans ages 60 and older in every local community. The AAA strives to develop a range of options that allow older adults to choose the home and community-based services and living arrangements that suit them best. The AAA is part of a national network of over 670 AAAs established under the OAA to improve the quality of life for older persons by creating a network that maintains a holistic view of aging. The AAA are mandated to "foster the development and implementation of comprehensive and coordinated systems to serve older individuals...."

Highlights of AAA Activities in 2009:

- In 2009, the AAA received federal stimulus funds in the amount of \$206,648 specifically to provide additional meals for seniors, both in congregate settings and home delivered.
- Two state-funded programs had to implement a freeze for new admissions due to state budget constraints (Senior Care and Group Home Subsidies).
- The AAA's Long Term Care Ombudsman (LTCO) program's budget was reduced by \$75,000, which resulted in the elimination of one full-time position for that program. Despite this challenge, the LTCO was successful in recruiting a team of 14 new volunteers to investigate and assist in the resolution of residents' concerns and complaints in assisting living and nursing care facilities.
- The Health Promotion program of the AAA was also successful in recruiting additional volunteers to lead Bone Builders Exercise classes on bone health and falls prevention, thus increasing the number of free classes offered in the county from six to eight.
- In partnership with the Beacon newspaper, several outreach efforts were implemented to inform seniors and their families about helpful services in the County.
- The AAA also participated in the activities of the county Senior Sub-Cabinet and the one-year anniversary event of the County Executive's Senior Summit. ■

Commission on Aging Activities

The Commission on Aging had an active and productive year in carrying out its responsibilities to advise and counsel the County Executive, the County Council and the departments of county, state and federal governments on matters of concern to Montgomery County seniors. During 2009, the Commission's advocacy was tempered by difficulties created by the severe economic and budget crises. Nonetheless, the Commission maintained its unqualified support for the critical programs of the DHHS that constitute the core safety net programs sustaining the vulnerable and needy seniors in our community. Working in consultation with key DHHS officials, the Commission developed proposals and initiatives that carefully reflected the most compelling needs of the senior population.

Budget Testimony: The Commission testified before the Director, DHHS, the County Executive and the Council. During the budget deliberation process, many of the Commission's members, in groups of two or three, met face-to-face with members of the Council to voice their support of Commission priorities. It is fair to say that, with respect to the core safety net issues for which the Commission advocated, the Council, in its final budget decisions, substantially adhered to the principles invoked by the Commission to protect vulnerable seniors.

Supported Legislation: During the General Assembly's session in Annapolis, the Commission gave its support to legislation designed to protect the elderly from hate

crimes and crimes involving financial exploitation. The Commission also supported legislation calling for the establishment of a Silver Alert Program designed to train local law enforcement to assist in locating missing vulnerable adults who may be suffering from cognitive impairment. The Silver Alert Program was enacted into law.

Adult Services Policy Directive: In March 2009, the Commission wrote to the Governor to express its concerns regarding the imposition of a Policy Directive, issued by the Secretary of the State Department of Human Resources (DHR), which established a moratorium on accepting new referrals to certain Adult Service Programs. This directive had the effect of curtailing essential care management services for many in the growing senior population with serious health and safety issues. After consideration of the concerns voiced by the Commission, the DHR Secretary issued a modification to the Policy Directive that allowed Montgomery County to continue to provide these important and critically needed services.

Transportation: In the course of the budget proceedings before the County Council, there was a proposal to suspend the free RideOn and Metrobus service for seniors and people with disabilities. After due deliberation, the Commission strongly opposed the proposal and testified at a hearing before the Council. The Commission pointed out that this

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Montgomery County Commission on Aging

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COMMISSION ON AGING ACTIVITIES (CONTINUED)

proposal represented, among other things, the abolition of a well-considered policy established by the Council only in the past three years. The free service involved the recognition by the Council of the importance of providing no-cost bus transportation services for seniors and people with disabilities so they may obtain needed medical treatment and access to a host of public and convenience services—such as shopping and socialization activities. In its final budget determination, the Council retained the existing free bus service.

Annual Meeting: In May, the Commission



County Executive Leggett
at COA Annual Meeting

held its Annual Meeting at Brookside Gardens. County Executive Isiah Leggett presented introductory remarks about the difficult budget issues facing the county govern-

ment. The principal speaker, Secretary Gloria Lawlah, Maryland Department of Aging, provided a compelling overview of the changes taking place in Maryland regarding the provision of long-term care services for seniors. She described the development in Maryland of a modern approach designed to provide essential care in a community setting.



Secretary Gloria Lawlah,
Maryland Department of
Aging at COA Annual
Meeting

Stakeholder's Meeting: In June, the Commission conducted a Stakeholders' meeting. This is a public forum in which interested parties meet with members of the Commission to express their views about issues affecting seniors. The event typically draws individuals and representatives from a wide range of organizations who share their views with the Commission.

Summer Studies Sessions: In 2009, the Commission conducted four summer study sessions on topics that had been selected at the Annual Meeting. These study sessions are intended to provide an opportunity for in-depth consideration of important and emerging issues affecting seniors. The reports of these sessions are provided elsewhere in the Annual Report. However, it is worth noting that virtually the entire membership of the Commission actively participated in the sessions. Of equal import, there were many non-members of the Commission—many of whom are experts in their fields—who participated and provided a significant contribution to the study program.



Councilmember Roger Berliner and COA
members Irwin Goldbloom, Paula Post and
Elaine Binder at 2009 Health Forum

Health Forum: Together with Council member Roger Berliner, the Commission sponsored a Health Forum, entitled "Feeling Your Best at any Age." The Forum was held

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COMMISSION ON AGING ACTIVITIES (CONTINUED)

in November at Fox Hill in Bethesda. Speakers included Mr. Berliner, Congressman Chris Van Hollen, Linda Krause and Jill Johnson of Suburban Hospital, and Kim Burton from the Mental Health Association of Maryland. There were many exhibitors who had displays of programs and services available to county seniors.



Elective Officials who attended the Commission on Aging Legislative Breakfast: 1. Delegate Jim Gilchrist with COA members Beth Shapiro and Grace Whipple; 2. Delegate Ben Kramer; 3. Delegate Bill Bronrott; 4. Senator Karen Montgomery; 5. Delegate Susan Lee; 6. Senator Jennie Forehand; 7. Delegate Al Carr

Legislative Breakfast: In November, the Commission also hosted a breakfast meeting for members of the State Senate and House of Delegates who represent Montgomery County. Many legislators attended and participated in a spirited discussion of legislative issues and goals affecting seniors. Later in the month,

the Commission testified before a Legislative Forum conducted by the Montgomery County delegation.



COA members Diane Vy Nguyen-Vu and Alan Kreger at COA Legislative Breakfast

County Executive's Senior Sub-Cabinet:

Finally, one of the most important on-going activities of the Commission during 2009 was continuing participation in the activities emerging from the 2008 Senior Summit. The Commission was actively involved in the meetings and sessions of the Sub-cabinet group, which was created by the County Executive to implement the concepts and proposals that emanated from the Summit. COA members also participated in work groups, led by senior county staff, which were formed to address major areas identified at the Senior Summit:

- Civic and Social Engagement,
- Communication and Outreach,
- Employment, Health and Wellness,
- Home and Community-Based Services,
- Housing and Zoning,
- Safety,
- Transportation and Mobility. ■

FY09 Committee Activities

Communication and Community Outreach Committee

The Communications and Community Outreach Committee works with county staff to identify and implement strategies for communicating with the public about issues pertaining to seniors in our community. Communication needs were an overarching factor in many of the recommendations stemming from the 2008 Senior Summit, and the Committee considers these recommendations as it carries out its work.

The Committee produces the Commission's county cable television show, *Seniors Today: Resources for Vital Living*. Nine shows are produced annually. Each show appears daily for a month and can also be seen on the county's Senior Web site at www.montgomerycountymd.gov/senior. A tenth show features the winners of the "Path of Achievement Awards" given to seniors who have made outstanding contributions in various fields in Montgomery County. The show is seen on channel 6 on Comcast cable and on channel 30 on Verizon cable.

The program features events of interest to the senior community, and covers topics on health, housing, continuing education, cultural events, aging in place, services for seniors and consumer protection. The program features various events such as job fairs, arts fairs, and information expos are featured, as well as shows on adult day centers, library services for seniors, nutrition and many other

subjects of interest to our senior population. Among the guest in 2009 were representatives from the Senior Health Insurance Program, the Census Bureau, the National Institute on Aging, the Levine School of Music, Easter Seals Adult Day Center, and a range of county programs and services for seniors.

In 2009, Committee activities also provided support and input on a variety of new communication initiatives, including the county's Senior Web Site with information and links to county services and programs, a new publication for seniors called *Living and Thriving in Montgomery County*; an updated brochure about the Commission and its activities, inserts and promotions for county activities in local newspapers, and development of a Listserv for individuals and organizations interested in news and information related to Montgomery County seniors. ■



Caring for your aging parent or loved one?
It's not all up to you. Call us.

Senior Resource Line
240-777-3000 240-777-4575 (TTY)

Now taking calls till 7:30pm Tue, Wed, Thur
Regular hours M-F 8:30 - 5:00
A service of your County Government

Health and Wellness Committee

The Committee began 2009 by renaming itself, thereby broadening its perspective beyond access to healthcare. The purpose of the Committee is to focus attention on the health and wellness of active, healthy seniors, as well as the frail and needy, and individuals in diverse racial/ethnic groups. In that context, the Committee assesses and evaluates a variety of issues, formulates and provides recommendations and advice to county leaders.

Over the year, the Committee directed its attention to a range of important issues: the Community Health Improvement Process (CHIP); the File of Life; creating opportunities for working with the Commission on Health; the Geriatric Behavior Mental Health initiative; hospital discharge planning; a review of the Senior Summit Recommendations to determine possible areas of involvement; health and wellness programs supported by the Health and Human Services Department; co-sponsorship of the Health Forum developed by County Council Vice President Roger Berliner; and Aging in Place.

One of the major accomplishments of the Committee this past year was to successfully advocate for making the File of Life more available to older adults in the county. The File of Life is a program run by the county's Fire and Rescue Service. Its centerpiece is a magnetized packet containing a form to be filled out by residents with up-to-date health and medical information and attached to the refrigerator. County rescue personnel are

trained to look for the form in emergency situations.

Other activities included:

- Asking the Commission on Health to increase information about the importance for older adults in having Advance Directives and in some cases, Do Not Resuscitate orders.
- Reviewing Senior Summit recommendations, such as the need for respite care and day care availability, to determine their relevance to the work of the Committee.
- Working with the county to prioritize and possibly obtain grants for science-based wellness, disease-specific, and physical activity programs currently being funded through a variety of sources.
- Following a summer study on Aging in Place, successfully advocating for making the topic a Commission on Aging priority and monitoring county efforts to enable seniors to successfully age in place.
- Continuing involvement with the Community Health Improvement Process (CHIP) through liaison with the Commission on Health.
- Establishing a focus on the issue of hoarding, an important public health and safety matter, which involves an estimated 6% of the population, of which 70-80% are seniors.
- Continuing attention to the topic of hospital discharge planning. ■

Senior Services Oversight Committee

This committee reviews and assesses county programs for seniors. It advises the Commission on the need for senior program problem resolution, modifications, and improvements. Committee members spent time this year discussing the history, mission, and purpose of the committee. It was agreed that the committee should undertake projects that can realistically lead to a specific approach to solve a problem. The members preferred to pursue substantive issues with potential for resolution.

The committee heard from the Adult Protective Services (APS) staff about the lengthy waiting list for the Adult Evaluation and Review System investigations due to a shortage of nurses. In addition, there has been an increased need for nurses to be involved in the APS due to the increased number of self-neglect referrals involving behavioral and medical issues, especially in group home/assisted living facilities. The committee decided to look further into establishing a facility to take in and care for seniors with behavioral health issues by inviting the lead person in Fairfax County who administers a similar program to speak to the committee.

The committee discussed and formed a workgroup to explore developing a pilot project to provide subsidies to assisted living facilities and group home providers to serve the

behavioral health needs of seniors by hiring trained personnel. This proposed project when fully developed will be submitted to the Commission for approval and forwarding to DHHS. An alternative long-range approach would be to identify potential partners who would benefit by the implementation of this project, convene a meeting to further refine the concept, and to assess the interest, resources, and feasibility of the project.

Another work group was formed to refine and further develop a concept paper and approach for dealing with the development of a Geriatric Behavioral Health Services Treatment Team. This project, when fully developed, will be submitted to the Commission for approval and forwarding to the Area Agency on Aging. Committee members also are examining an alternative approach to modify the concept and have the team incorporated into existing county programs.

Finally, the Committee designated for further study the issue of financial exploitation of seniors. The Committee invited the County Attorney and representatives of fraud units at local banks to meet with the committee in January 2010 to discuss the issue and formulate steps that can be taken to help seniors and prevent the problem from occurring. ■

SENIOR SUMMIT WEBSITE

Visit www.montgomerycountymd.gov/seniorssummit
for updated information and recommendations from the November 2008 Senior Summit

Public Policy Committee

The Public Policy Committee focuses on policies and programs of the local, state and federal governments that affect quality of life for seniors in Montgomery County. In 2009, the Committee reviewed all of the ideas that emerged from the Senior Summit, with the objective of identifying good ideas that were not selected for immediate focus in official Summit follow-up efforts.

One of the many issues uncovered through this review was the difficulty reportedly faced by seniors in finding new doctors who would accept Medicare patients. The Committee decided to launch a summer study session focusing on this issue. Following the summer study effort, a task force will continue this work. The work has resulted in agreement to advocate for funding to help offset the costs of medical students' educations; this funding would be conditioned on their agreement to not discriminate against new Medicare patients in their practices. The committee also reviewed legislation at the state and federal levels, such as the Elder Justice Act, as well as the issues of property tax relief for seniors, the lack of sufficient number of geriatric specialists to meet the needs of the growing senior population, liability insurance for volunteers helping seniors, and financial exploitation of seniors.

Finally, the Committee arranged for a briefing breakfast for the Montgomery County delegation to Annapolis that provided a highly useful forum where the COA and delegates could exchange essential information about Commission and legislative priorities. ■

Budget Priorities



In 2009, the Commission developed priorities for use in its advocacy program as part of the budget process and as guiding principles for Commission promotion to further and enhance the interests of the senior population.

During the county's annual budget process, the Commission reiterated its enduring commitment and concern for the wellbeing of needy and vulnerable seniors in the community. In past years, we had focused on specific programs and urged their funding by the Executive and the County Council.

In 2009, due to the serious effects from the prevailing economic and budgetary crises, we urged that focus be directed at the safety net programs as a whole in light of reports of critical needs of the vulnerable in our community. Specifically, we pointed to: the substantial increase in the number of Adult Protective Service investigations; the increase of investigations of abuse and neglect of residents of assisted living facilities; and the substantial increase in requests for transportation assistance, utility assistance, rental assistance and calls from seniors looking for full and part-time jobs to enable them to pay rent or mortgages. We urged the Executive and the Council to address these safety net programs with care to ensure that the effects of our difficult times not fall disproportionately on vulnerable seniors.

The Commission reiterated its advocacy for the creation of a Geriatric Behavioral Health Treatment Team, which would provide mental health screening and treatment for uninsured seniors with low income and without access to treatment due to state-mandated priorities that severely limit the availability of such services.

Finally, the Commission adopted a series of recommendations from the Aging in Place Summer Study Group to serve as guiding principles for the Commission to consider and implement in both the near and long term. Those principles are set forth in this Report in the Aging in Place Summer Study Report. ■

FY09 Summer Studies Work Groups

Aging in Place

More than 20 people, including Commissioners, Montgomery County staff members and persons from public, private and nonprofit communities who actively engage with older adults, participated in a Summer Study Group related to Aging in Place.

Considerable research and numerous articles have documented a range of needs of older adults who are aging in place as being: general information; transportation; food availability/delivery; preventive health measures including exercise and medical and dental care; socialization; general safety including fire protection and identity theft protection; home modification; home repairs and housekeeping; health insurance; social work and mental health support; bereavement support; friendly visits or calls; community involvement; and services for foreign born and speakers of other languages.

There are numerous public and private services available in Montgomery County that facilitate aging in place for seniors who wish to do so. To inform residents about these services, the County has created a Senior Web site, a cable television program, *Seniors Today*, and several publications: *Montgomery County Seniors' Resource Guide*, which is updated annually, and *Living and Thriving in Montgomery County*.

To fully inform itself about the topic and identify related needs, Group members reviewed relevant articles and policy papers, performed background research, and conducted a survey among members of a senior center. In addition, they undertook a lengthy process to develop a working definition of the term "Aging in Place"

that will facilitate current and future work on the topic. Aging in Place is defined as: *a choice made by older adults who wish to remain independent in their community (and/or their homes), living with or without assistance*. To do so often involves questions of safety, health, affordability, accessible services, socialization, transportation, recreation and other supports.

The Group identified a number of related issues:

- People vary considerably in their capacity to accept changes and their adaptability to different circumstances.
- Many older adults avoid making decisions about their future and thus do not make decisions that may be best for them. Choices are not clear, and some people need to be convinced that a small amount of help can make a big difference.
- Others refuse to accept help. It is important to explore ways to provide information and assistance to older adults, their children, and other trusted individuals to help them make informed decisions about aging in place.
- There is a need to broaden outreach and communication strategies to inform older adults about the variety of resources available on this topic.

The Summer Study Group also identified needs for current and future Villages in the county—grassroots organizations created to provide services to older adults who are aging in place:

- Training for volunteers in a number of areas

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AGING IN PLACE (CONTINUED)

including sensitivity in working with older adults;

- Assistance with resolving governance issues, including development of a template for by-laws and for obtaining nonprofit status;
- A mechanism for identifying and vetting vendors and service providers;
- Fostering discussions on identifying the needs of older adults beyond or in addition to those uncovered in surveys; and
- Clear guidance on the issue of liability insurance.

Finally, the Group developed a series of recommendations for the Commission to consider in the coming year:

- Adopt *Aging in Place* as a priority issue that promotes the dignity of aging and enhances the quality of life.
- Monitor the work of the 2008 Senior Summit

work groups to ensure that aging in place issues and needs are addressed.

- Advocate for the county, placing a high priority on the ability of older adults to age in place in its planning and budgeting programs and policies.
- Request that the Communications and Outreach Committee of the Commission focus on providing ongoing effective communications about resources and services available to older adults who are aging in place.
- Partner with private and nonprofit providers, such as GROWS, faith-based, multi-cultural and civic groups and schools, to identify and support implementation of effective outreach and service delivery options for aging in place.
- Recognize the evolving “Village” concept as one approach for the concept of *Aging in Place*. ■

Access to Geriatric Medical Care

An important issue that arose at the Senior Summit concerned reported difficulties faced by seniors in finding primary care physicians willing to take new Medicare patients due to poor reimbursement levels. A Summer Study Group examined this concern and explored the feasibility of government subsidy for highly qualified students of limited means in exchange for their commitment to specialize in geriatric or primary care medicine and to serve in that specialty for a specific amount of years after graduation.

During the summer, a group studied the topic and conducted in-depth research about systems

such as the military that already offer this type of benefit, recommendations and policies of professional medical organizations, and related needs at the county, state, and federal levels.

At the conclusion of the Summer Study, the Public Policy Committee assumed responsibility for further consideration of the topic and will study it in further detail in the coming year. As a result of work to date, the Commission plans to advocate for funding to help offset the costs of medical education for students willing to go into primary care. ■

Mental Health Services

The Mental Health Services Work Group, with assistance from several county staff members, examined important topics related to Mental Health Services. These topics included: education, prevention, outreach, screening, referral, intervention, treatment, and service improvement through coalitions and teams. It reviewed successful programs in other areas of the country and discussed Montgomery County's greatest needs. Although 13 per cent of low-income seniors are in need of mental health services, only two percent currently are being served.

The Group also reviewed successful practices throughout the country, as well as the components necessary for effective implementation. They included the following:

Staff Persistence—Performing regular client visits and following up with questions on specific issues.

Cultural Competency—Treating older adults with sensitivity related to their language, dialect, and heritage.

Multi-Service Programming—Providing services as part of a more comprehensive program (i.e., when providing one service to a client, the provider can direct the client to other needed services.)

Health Promotion—Disseminating information by mental health providers within the context of sessions on general well being.

Comprehensive Assessment and Consumer Direction—Including mental health topics in the provider's initial assessment process and addressing them subsequently at the most

appropriate time; also utilizing nontraditional referral sources such as corporations, businesses, and workers who come into contact with older adults through their everyday work.

Evaluation—Compiling and assessing promising practices through ongoing program evaluation at specific time intervals with focus on staff ability to meet needs and outcomes for program participants; in Maryland the Department of Health and Mental Hygiene administers the Adult Evaluation and Review Services through local health departments.

Collaboration at all levels—Coordinating state and local services that encompass many of the mental health needs of clients.

Cross Training—Linking training of service providers (mental health counselors, aging services providers, and alcohol/medication professionals) to create a network of services for seniors.

University Links—Connecting promising practices with research projects and placing students in aging services centers to enhance staff capacity.

Members agreed that the need for a Geriatric Behavioral Health Treatment persists and is a worthy goal that should be supported and pursued. It would provide mental health screening and treatment for low-income seniors who are uninsured and who cannot access such services because of state-mandated priorities that severely limit availability. The Group suggested an appropriation funded at \$300,000 for a pilot Behavioral Health Treatment program. The

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MENTAL HEALTH SERVICES (CONTINUED)

program would use a brief intervention model, beginning with a small group of clients. It would run approximately 10 to 15 hours per week, be

held in county space, and use county administrative support. Should funding be unfeasible, the Group suggested seeking grant or Medicare funding. ■

Public/Private Partnerships

The Summer Study Group on Public/Private Partnerships wanted to develop a strategy to partner with private, voluntary, and public organizations in Montgomery County to:

- Leverage partners' resources to make seniors aware of Montgomery County resources, programs and services.
- Collaborate with partners on specific creative joint public/private targeted ventures to disseminate information to seniors, for example, through available grant funding mechanisms.

The goal was to increase use of county resources, programs and services by the target aged population. It was hoped that these partnerships would help contain outreach costs and serve mutually beneficial county and organizational goals of improving lives of county seniors. The desired outcome was increased promotion of county resources, programs and services to seniors through partners' various in-place information dissemination mechanisms.

The Study Group held three meetings and discussed a variety of related issues including the elements for a successful partnership and how they might supplement and complement DHHS activities related to seniors, benefits that DHHS can offer potential partners, previous DHHS successes and challenges in partnering,

and current partnering gaps/needs. The Committee also tried to determine ways in which partnerships could help in implementation of Senior Summit recommendations and how they might be applied to include other DHHS and county department activities.

The Study Group recommended forming a task Force of Commission members to informally pursue public/private partnerships to benefit Aging and Disability Services and possibly other county entities. Some Group recommendations were to approach potential funders for grants for specific initiatives, such as creating a program to reduce social isolation, and/or supporting a unique health care delivery system targeting cultural communities similar to the HHS Neighbors Campaign. In addition, the Group recommended inviting Bruce Adams, Director of the Office of Community Partnerships, to speak to this Task Force about his experience in working on Public/Private Partnerships, and Steve Silverman, Director of the Office of Economic Development, to explain the role of his office with regard to partnerships with the business/employer sector and how the Task Force can benefit from this experience.

Finally, the Group recommended strengthening its activities by coordinating its activities with the COA Communications and Community Outreach Committee. ■

Senior Summit Accomplishments in Year One

The Commission on Aging is proud to have taken an active role in the November 2008 Senior Summit and in many of the subsequent work groups that are striving to make Summit recommendations a reality. Although the work is ongoing, the County was able to report a range of significant achievements that occurred during the first year following the Senior Summit.

Civic and Social Engagement



- **Expanded outreach and programming**
 - Intergenerational programming
 - Congregate meals
 - Pro-Bono Consultant
 - Senior Center outreach/promotion

Communication and Outreach

- **Expanded outreach**
 - New Senior website
 - Targeted mailing to low-income residents
 - Public forums
 - New publications
 - Living and Thriving
 - Senior Beacon inserts



Montgomery Senior Site
Caregivers
Consumer Issues
Employment
Health
Recreation & Libraries
Safety
Senior Housing
Taxes & Finance
Transportation

Employment



- **Planning**
 - Participated in State workgroup studying employment practices and opportunities
 - Participated in National effort to address impact of economy on seniors
- **Senior (50+) Employment Expo**

Health and Wellness

- **Health activities**
 - Silver Sneakers
 - Bone Builders
 - Active Adult Fitness Clinics
- **Planning**
 - Community Health Improvement Plan (CHIP)



Home and Community Based Services



- Facilitate “village” models
- New *Better Living at Home* intervention

Housing and Zoning

- **Affordable housing options**
 - Victory Forest, Victory Court, Marian Assisted Living, etc.
- **CDBG grants to support aging in place**



Safety



- Increase Fire Safety Awareness
- Expand Neighborhood watches
- Integrated approach to safety among Fire and Rescue Services, the Office of Consumer Protection, and the Police Department

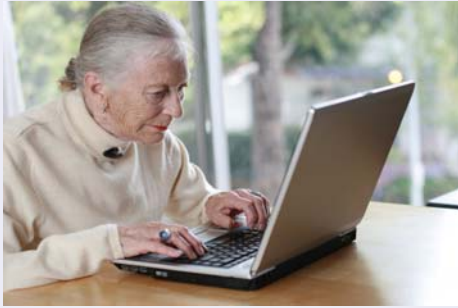
Transportation and Mobility

- **Pedestrian**
 - Safety audits
 - Modifying length of crosswalk signals
 - Refuge islands and extended sidewalks (bump outs)
 - Education/awareness campaigns
- **Public transportation**
 - Continued free RideOn service for seniors
 - Enhance Call N Ride
 - Expand bus routes to senior housing buildings



LOOKING FOR SERVICES FOR SENIORS?

Visit Montgomery Senior Site for information on



- Caregiving
- Consumer Issues
- Employment
- Health
- Recreation and Libraries
- Safety
- Senior Housing
- Taxes and Finance
- Transportation

Montgomery Senior Site is designed to
provide information on county services
in one easy-to-find place.

www.montgomerycountymd.gov/seniors



Isiah Leggett, Montgomery County Executive

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